

Work Order ID 103715

103715

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July-22-13 2:39:07 PM

Item ID: D4002-043 Accept ***N9000040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: AUX TANK DRAIN HOSE ASSY, AFT
 Start Date: 6/25/13 Start Qty: 1.00 ***1*** Cust Item ID:
 Required Date: 6/26/13 Req'd Qty: 1.00 ***1*** Customer: CU-DAR001
 Reference: RMA RA111567

Approvals: Process Plan: W Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr								
D4002	D								
100		0.00							
100									
QC		0.00							
Quality Control	Memo INSPECT RA111567 1 X D4002-043 B95635								

FF
13-07-25

110	Identify as per dwg & Stock Location:	0.00							
110	Replace ID Tag & Heatshrink								
Packaging	Memo	0.00							
Packaging	RETURN TO STK USING NEW B/N								

13-07-26

120	QC21- Final Inspection - Work Order Release	0.00							
120									
QC	Memo	0.00							
Quality Control									

13-07-30

MLJ 13-07-29

Picklist Print

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Work Order ID: 103715

Parent Item: D4002-043

Start Date: 6/25/13

Required Date: 6/26/13

Parent Item Name: AUX TANK DRAIN HOSE ASSY, AFT

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP rev A 10.01.21 new issue Prelim EC verified by:DD IPP rev B 10.11.03 added
MS29528-04 DD verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D4002-043		Manufactured	No				Each	6.0000		1			
AUX TANK DRAIN HOSE ASSY, AFT													

Location

Loc Qty

Loc Code

ST194

6

100583

6

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Green Street
Bury, Ontario K6A 1K7

Date: 21-Jun-13
Customer Name: Panterra Heli Support Ltd.
Customer Code: PANT01
Telephone No: 905-563-1413
E-mail Address: mike@panterra.ca
Contact Name: Mike Tylee
Issued by: Lisa McMachen

DART RA Number: RA111567 - PART 2
DHS RA Number:
DHS PO #: PO5648
DART Invoice #: INV111718
Customer Ref: 13-519201
PAR/CAR/NCR/SQ: N/A

Quantity	Part Number	Description	Batch Number
1	D4008-041 103760	AUXILIARY TANK FILLER SPLASH GUARD	97598
3	TBA28B 103769	CABLE TIR FASTENER	958103
1	TY25MX 103770	TIE WRAP	1151095

Reason for Return: PARTS ARE IN RECEIVING. MANUAL CREDIT
NEEDED. PLEASE SEE PART 1 OF THIS RA. ALSO REFER TO RA111536

Credit Instructions:

☐ Full credit
☐ None

Return Instructions: Commerical Invoice Yes ☐
Documentation (STC/ARC/ICA) Yes ☐
Packing Slip Yes ☒

Include on Commerical Invoice:
Part Number/Description / Value in USD
Parts are aircraft parts / return to Manufacturer

Shipping Instructions: Prepaid _____ Collect _____ Courier _____
Account # _____

RECEIVING RETURN AUTHORIZATION

Receiver:		Condition of Packaging:		Paperwork:	P/L	Photograph Required	
Date:		Freight Company:		RA	NONE	Yes	No
Quantity	Part Number	Batch	QC Verification	CHG #	W/O#	Disposition	

QC Inspector: Photograph Attached: Condition:
Date: Yes No Sealed Complete Short H/W Short Kit No P/W Damaged

QC Comments: Special Return/Rework Instructions:
PARTS ARE IN RECEIVING

Issue Credit: Yes No Invoice Amount: MANUAL
Restocking Fee:
GM Approval: Date: Freight:
Net Credit:

Quality Assurance: Close Date:

DQA: _____ Date: _____



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QA Closed: _____ Date: _____

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